



**Las Vegas Fire & Rescue**  
**Fire Engineering**  
**Fire Permit Application**

Fire Permit: \_\_\_\_\_

GC Permit: \_\_\_\_\_

Stand Alone (circle if applicable): Y

**Submittal Type**

(please check only one – cannot be both)

New Submittal

Demo Work Only

As-Built/Revision

**Additional Services Requested**

(optional & please check only one – cannot be both)

OT Request (additional \$220.00/per hour, w/ 1-hr minimum)     OTC (additional \$117.00 per appointment)

**Project Information**

Address: \_\_\_\_\_ Valuation: \$ \_\_\_\_\_

Project Name/Tenant: \_\_\_\_\_

**Applicant**

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Contractor**

Company Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email (if different from Applicant): \_\_\_\_\_

NV State Contractor License & Class: \_\_\_\_\_

NV State Fire Marshal MC #: \_\_\_\_\_

**Type of Permit**

<input type="checkbox"/>	ASI	Annual Smoke Control Special Inspection Report
<input type="checkbox"/>	Battery	Battery System/Energy Storage System
<input type="checkbox"/>	CenStation	Central Station Monitoring
<input type="checkbox"/>	CleanExSys	Clean Agent Extinguishing System
<input type="checkbox"/>	CO2	Bulk CO2 System
<input type="checkbox"/>	ERS	Emergency Radio System
<input type="checkbox"/>	ExtSys	Other Extinguishing System
<input type="checkbox"/>	FA	Fire Alarm
<input type="checkbox"/>	FASN	Sprinkler Notification
<input type="checkbox"/>	FireAMMR	Fire Alternate Means/Method Request
<input type="checkbox"/>	FireReport	Fire Protection Report
<input type="checkbox"/>	FlamComLiq	Flammable Combustible Liquid System
<input type="checkbox"/>	GasCryo	Compressed Gas/Cryogenic System
<input type="checkbox"/>	General	General/Other
<input type="checkbox"/>	HighPiled	High Piled Storage

<input type="checkbox"/>	KitchHood	Kitchen Hood Extinguishing System
<input type="checkbox"/>	LPG	Liquid Petroleum Gas
<input type="checkbox"/>	MedGas	Medical Gas
<input type="checkbox"/>	Oil	Bulk Cooking Oil
<input type="checkbox"/>	Pump	Fire Pump
<input type="checkbox"/>	RPDA	Water District Backflow Upgrade
<input type="checkbox"/>	SmkCtrl	Smoke Control System/Removal
<input type="checkbox"/>	Sprnklr13	NFPA 13 Fire Sprinkler System
<input type="checkbox"/>	Sprnklr13D	NFPA 13D Fire Sprinkler System
<input type="checkbox"/>	Sprnklr13R	NFPA 13R Fire Sprinkler System
<input type="checkbox"/>	Standpipe	Standpipe System
<input type="checkbox"/>	Traffic	Traffic Calming Device
<input type="checkbox"/>	UGF	Underground Fire Line/Riser
<input type="checkbox"/>	Waterflow	Pre-Construction Waterflow

**Scope of Work**

Head Count – New/Relocated:	/
Total # of Hydraulic Calcs:	
Device Count – New/Relocated:	/
Total # of Power Supplies/Amplifiers:	

# of Tanks/Systems:	
# of Pumps:	
Total Linear Feet (UGF only):	
# of Floors (SmkCtrl/Standpipe only):	

*I, the Applicant, hereby certify that I have carefully examined & read the above application; that the same is true & correct; and that the work herein described is to be done in accordance with all the provisions of the applicable Codes & Ordinances of the City of Las Vegas, Nevada, & State Laws, whether herein specific or not. Additionally, if the "OT Request" or "OTC" box has been marked, I am formally requesting these additional services for every review, if eligible, & accept all associated fees. I understand that, even though all efforts to accommodate an OT Request will be made, there is a possibility my request may not be accepted & the project will remain in the standard queue. Furthermore, I understand that acceptance of an OT Request or OTC does not guarantee review and/or project approval.*

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*For Fire Engineering Staff Use Only*

Approval: \_\_\_\_\_

Total Fees Due: \$ \_\_\_\_\_